# Garforth Urban District Council.



### ANNUAL REPORT

ON THE

Health and Sanitary Conditions

OF THE DISTRICT

FOR THE YEAR 1948

BY

A. L. TAYLOR, M.D., D.P.H.,

(Medical Officer of Health)

AND

R. A. NAYLOR, C.R.S.I., M.S.I.A.,

(Sanitary Inspector)

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#### Garforth Urban District Council.

Chairman of the Council:

Councillor W. A. Holmes, J.P. (April - November, deceased).

Councillor P. Gent, J. P. (Appointed December)

Vice-Chairman:
Councillor A. Prince.

Public Health Committee:

Chairman—Councillor R. Coates.

Vice-Chairman—Councillor E. Linley.

Councillor H. Chappel. Councillor H. Morgan.

Councillor H. Cowes. Councillor S. Oxtoby.

Councillor R. B. Holt J.P. Councillor J. Parker.

Councillor J. Kilburn J.P. Councillor W. Prince.

Councillor T. Lockwood. Councillor A. Ridgway.

Medical Officer of Health:

A. L. Taylor, M.D., D.P.H.

Sanitary Inspector:

R. A. Naylor, C.R.S.I., M.S.I.A.

Clerk to the Council:

B. G. Taylor.

#### Garforth Urban District Council.

COUNCIL OFFICES,

GARFORTH.

## ANNUAL REPORT

OF THE

# Medical Officer of Health

FOR THE YEAR 1948.

To the Chairman and Members of the Garforth Urban District Council.

I have the honour to submit my Annual Report on the health and sanitary circumstances of the Urban District for the year 1948. With this report is included that of the Senior Sanitary Inspector.

#### GENERAL STATISTICS.

Area (Acres)	4,000
Population	12,400
Number of inhabited houses	
according to the Rate Book	3,541
Rateable Value	£49,086
Sum represented by Penny Rate	£190

#### SOCIAL CONDITIONS.

The district is becoming increasingly residential in character, a trend which is likely to be continued in the future. One colliery is working at the extreme end of the district, and a very large proportion of of the population now find employment in factories and offices in the Leeds area.

#### VITAL STATISTICS FOR THE YEAR.

Comparability Factor.—Once again this has not been issued and all the subsequent figures are uncorrected.

Live Births:-	Total	Male	Female
Legitimate	224	107	117
	10	6	4
Birth Rate per 1,000 of t lation18.1	he estim	ated reside	ent popu-
STILL BIRTHS:-	Total	Male	Female
Legitimate	6	3	3
Illegitimate	()	0	0
Rate per 1,000 population Rate per 1,000 Total (Liv	n ve and S	till) births	0.5 26.0
Deaths of Infants:— Under one year of age	per 1,00	00 births:-	_
	Total	Male	Female
Legitimate			4
Illegitimate			0
Rate per 1,000 live birth			36.
Number of women dying			
of, childbirth			0
DEATHS FROM ALL CAU	SES:-		
	Total	Male	Female
	133	77	56
Death Rate per 1,000 of	the est	imated re	si-

Remarks on Total Statistics.—The fall in the Birth Rate from 23.6 to 18.1 was not unexpected, and follows a trend which is general throughout the country. The factors influencing this trend are exactly comparable with those operating immediately after the first World War. Once again, I am glad to point out that no death occurred as a result of, or associated with, pregnancy or childbirth. This is a matter of the highest importance and is evidence of the high standard of ante-natal and obstetrical care which is now available for every child-bearing woman.

10.7

dent population

In the following table it will be seen that the Garforth Birth Rate follows very closely in trend to that for England and Wales and shows a consistent favourable comparison.

Year	Garforth	 England & Wales
1944	 21.4	 18.1
1945	 18.8	 16.1
1946	 21.1	 19.1
1947	 23.6	 20.5
1948	 18.1	 17.9

Death Rate:—The Death Rate of 10.7 is satisfactory and there has been no unusual incidence during the year. The following table shows the Death Rate for the past five years.

Year	Garforth	 England & Wales
1944	 11.5	 11.6
1945	 10.7	 11.4
1946	 10.7	 11.5
1947	 10.4	 12.0
1948	 10.7	 10.8

Chief Causes of Death:—The outstanding cause of death is from heart disease or circulatory disorder, followed in numerical order by deaths from Cancer. These figures are significant in pointing out the much longer expectation of life now enjoyed, in that they are diseases of late middle, or old age. Deaths from infectious or epidemic disease are now no longer a factor of any significance with the sole and dismal exception of Tuberculosis, which still takes steady toll and this year accounted for 7 deaths.

A detailed list of causes of death is printed a little further on in this report.

Infantile Mortality:—The Infantile Mortality Rate this year stands at 36 per thousand live births and there is, for the first time for some years, a slightly unfavourable comparison with England and Wales as a whole. At the same time, as I pointed out last year, one infantile death can make a very big difference in the rate per thousand, when dealing with a total of only 234 births.

The following table gives details of the causes of death and it will be seen that of the total of 8 deaths no fewer than six were associated with prematurity, a condition which makes the infant particularly prone to ills which the more robust infant can surmount. Several of the infants had a birth weight of between two and three pounds and their chance of survival must always be considered to have been extremely precarious. Nevertheless, the problem of prematurity is one which is being tackled earnestly by the local Health Authority and special apparatus, and specially trained Midwives, are being made available to help where the premature infant is born at home. Once again, no infantile death occurred amongst illegitimate infants and there was no illegitimate This speaks highly of the particular care stillbirth. safeguard the health and welfare of taken to unmarried mothers and their children.

#### PRINCIPAL VITAL STATISTICS FOR THE YEAR 1948.

${ m Rates}.$	Aggregate of Rural Districts	Aggregate of Urban Districts	West Riding Administrative County	England aud Wales	Garforth Urban District
Birth.	19.2	18.3	18.5	17.9	18.1
Death.	9.8	11.8	11.3	10.8	10.7
Caucer.	1 49	1.83	1.74	1.86	1.29
Heart and Circulatory	3.03	3 98	3.73		3.55
Diarrhoea under two, per 1,000 live births.	4.97	4.17	4.38	3.3	NIL
Zymotic	0.12	0.12	0.12		NIL
Respiratory Diseases.	1.15	1.34	1.29		1.05
RespiratoryT.B.	0.36	0.37	0.37	0.44	0.56
Other T.B.	0.07	0.07	0.07	0.07	NIL
Total T B.	0.43	0.44	0.44	0 51	0.56
Puerperal Sepsis	0.13	0.09	0.10	0.24	NIL
Other Maternal	1.12	1 02	1.05	0.78	NIL
Total	1.25	1.11	1.15	1.02	NIL
Infantile Mortality.	40.0	38.0	34.0	39.0	36.0

# CAUSES OF DEATH IN THE GARFORTH URBAN DISTRICT, 1948.

Cause of Death	Male	Females	Cause of Death	Males	Femaes
ALL CAUSES	77	56			
1 Typhoid and Paratyphoid Fever 2 Cerebral Spinal Fever 3 Scarlet Fever 4 Whooping Cough 5 Diphtheria 6 Tuberculosis of respiratory System 7 Other forms of tuberculosis 8 Syphilitic Diseases 9 Influenza 10 Measles 11 Acute Poliomyelitis and Polioencephalitis 12 Acute Infantile encephalitis 13 Cancer of buc. cav; and oesoph.(M.) uterus (F.) 14 Cancer of stomach and duodenum 15 Cancer of Breast 16 Cancer of all other sites 17 Diabetes 18 Intra-cranial vascular lesions 19 Heart Disease 20 Other diseases of circulatory system 21 Bronchitis 22 Pueumonia 23 Other respiratory diseases 24 Ulcer of stomach or duo-	3  1 	1 4 13 16 5	27 Other Digestive disorders 28 Nephritis 29 Puer and post-abort sepsis 30 Other maternal causes 31 Premature Birth 32 Cou. mal: birth inj. infant: dis. 33 Suicide 34 Road Traffic Accident 35 Other violent causes 36 All other causes 36 All other causes  Deaths of Infants under 1 year— Total legitimate Illegitimate	1 4 1 2 3 4 4 4 107 101 6 3 3	3 1 3 1 3 1 14 4 4 117 113 4 3 3

RECORD OF DEATHS IN AGE GROUPS, 1948

	Males	Females	Total
Under 1 year	4	4	8
1— 5 years		_	
5—10 years	_	_	
10-15 years	1		1
15-20 years	1	1	2
20—25 years		1	1
25—35 years	2	4	6
35—45 years	3	1	4
45—55 years	6	4	10
55—65 years	15	4	19
65—70 years	7	5	12
70—75 years	14	9	23
75—80 years	8	10	18
80-85 years	13	9	22
85—90 years	2	3	5
90—95 years	1	1.	2
Totals.	77	56	133

DEATHS OF INFANTS UNDER ONE YEAR

Corrections	Under 1 week	er ek	1 to week	ks 2	2 to 3 weeks	to 3 weeks	3 to 4 weeks	) 4 KS	1 to 3 months	sqt ths	3 to 6 months	6 ths	6 to 9 months	o 9 ths	9 to 12 months	12 ths	Total	la.
Cause of Death	M	F4	M	FI	M	H	M	F	X	F	M	F	2	FI	M	H	M	F
Prematurity	prosi	62	0	Н	0	0	0	0	0	0	0	0	0	0	0	0	-	ಣ
Atelectasis Prematurity		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Н	0
Asphyxia Pallida Prematurity		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-	0
Bronchopneumonia Bronchitis	0	0	0	0	0	0	0	0	0	0	H	0	0	0	0	0	_	0
Meningitis Pneumonia	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0	$\vdash$
Total	ಣ	6	0	1	0	0	0	0	0	0		-	0	0	0	0	4	4

The following is a	table	showing	the	Death	Rate
of Infants under one	year o	of age per	1,00	O live b	irths:

Year		Garforth	England & Wales
1944		36.1	 46.0
1945		22.9	 46.0
1946		20.0	 43.0
1947	• • •	31.0	 41.0
1948	• • •	36.0	34.0

#### PREVALENCE and CONTROL of INFECTIOUS DISEASES

To me. the outstanding factor is the continued complete absence of Diphtheria, not only as an epidemic disease, but as a disease of even sporadic The rate of immunisation continues appearance. high, and during next year I intend to give 'refresher' doses of immunising material to all children who have been immunised more than three or four years previously. Once again it is necessary to warn against complacency, and to point out that the absence of clinical Diphtheria is by no means a sure sign that the Diphtheria germ is not present amongst Careful investigation shows that something like 5 per cent. of the child population at any one time may carry in their throats the germ which causes Diphtheria, and that only the high level of protection afforded by immunisation prevents the occurrence of the disease.

With regard to Whooping Cough, I am not yet able to tell you that mass immunisation is considered a practical proposition. Latest reports, however, indicate that the time is almost here when protection against this most distressing, and indeed, sometimes fatal disease can be offered at the same time and with the same injection with which the child is protected against Diphtheria, This measure will be an advance of the first order and will constitute another long stride forward in the march to eradicate child deaths from infectious disease.

Measles during 1948, was a negligible factor with only 17 cases occurring.

Infantile Paralys's.—One case only of this disease occurred during the year.

Influenza.—No epidemic influenza was experienced and there was no recorded death from this disease.

Ophthalmia Neonatorum.—No notification of this condition was received and again reflects great credit on the advance in preventive medicine and of care given to infants at, and immediately after, birth.

Smallpox.—No case occurred during the year. The remarks I made on vaccination in the 1947 Report apply with equal force to-day.

Indeed they apply with even greater force, as vaccination is now no longer compulsory. There is some concern that the number of parents accepting protection against Smallpox for their infants is falling to an even lower level, and it is necessary to stress the possible risk should virulent Smallpox be introduced from foreign lands.

Tuberculosis. Fourteen new cases of pulmonary tuberculosis and five of non-respiratory tuberculosis were notified during the year, and there were seven

deaths from the respiratory group.

This is a gloomy picture and one on which it is difficult to comment with any satisfaction. Again, I must point the moral that tuberculosis is an infectious disease and that the greatest source is the patient in daily contact with members of his family in particular, and the general community to a slightly lesser degree. Continued and indeed, increasing, shortage of sanatorium accommodation is causing many sufferers, often in the most infectious stage, to be kept in their own homes, frequently in utterly unsuitable surroundings, where they form a potent source of risk and dissemination to their families and friends.

Wherever possible, special consideration is given in the re-housing of cases unsuitably accommodated, but even this by no means ensures that the unfortunate sufferer is satisfactorily segregated. Indeed, it is difficult to see how humanity can permit such sufferers to be treated like lepers or social outcasts so long as they remain at home. I am afraid that that the only possible hope of improvement lies in the early and complete accommodation of all cases of Tuberculosis in sanatoria, and their retention there until all risk of infection has disappeared. General measures such as improvement in housing and nutritional standards are, of course, extremely important and helpful, but will not obviate the spread from the heavy sources of infection which I have described.

Scarlet Fever.—The disease continues mild in type and 32 cases occurred during 1948. Of these, 28 were admitted to Hospital, but more recently an increasing number are being nursed at home, at the discretion of the family doctor. This course of action is one which has become widespread of recent years, and in areas where it has been the practice for some years it has been found that no increase in incidence has occurred and that no undesirable complications have ensued.

Fever Hospitals.—The Garforth Cliff Isolation Hospital has been closed down. This action is in line with the general policy of closing down small Fever Hospitals which have become redundant due to the marked diminution of incidence and severity of epidemic infectious disease. Indeed in this field it is possible to say that the problem is not to obtain a bed, but to fill even the existing hospital accommodation. Cases from Garforth Urban area are now admitted either to Seacroft or Aketon Hospitals and satisfactory provision is made for their accommodation.

# NOTIFIABLE DISEASES (OTHER THAN TUBERCULOSIS) DURING THE YEAR 1948.

	4 100 100 100 100 100 100 100 100 100 10		
73.	Total	('ases	tD - 4 - 1
Disease	notified	admitted Hospital	Total Deaths
Smallpay	110011100		25 0 0 0 0 1 1 1
Smallpox	0.0	00	
Scarlet Fever	32	28	- table
Diphtheria			
Enteric Fever (Paratyphoid)			
Puerperal Fever	-	-	
Puerperal Pyrexia		grow-shifted to	
Erysipelas	2		
Polioencephalitis	1	1	
Pneumonia	2		
Ophthalmia Neonatorum			
Cerebro-Spinal Fever	1	1	1
Encephalitis Lethargica			
Measles	17		
Whooping Cough	_ 33		
Totals	88	30	1
			2

The following is a list showing the prevalence of Scarlet Fever and Diphtheria during the last ten years.

77	CASES N	OTIFIED	DEATHS		
YEAR	Scarlet Fever	Diphtheria	Scarlet Fever	Diphtheria	
1939	18	_		1	
1940	22	5			
1941	17	19		1	
1942	23	16		2	
1943	30	2			
1944	36	1	1		
1945	32				
1946	18				
1947	27			-	
1948	32	- Champaniles			

	İ													
	Total.	10	$\infty$	11	12	12	20	7	က	23	1	-		88
	Erysipelas				P. **	•	•		•	•	<del></del> 1	-	•	2
GROUPS	Впецтопія	:		•	•	:		:	1			:		5
AGE	guiqoodW dguoD	9	ō	4	<u>ئ</u>	20	9		•		•	:		33
DISEASES IN	Measles	4	23	23	က	ಣ	က	•	•	:		•	•	17
BLE DISE	Cerebro- Spinal Fever		•	:	•	•					•	•	:	1
NOTIFIAE	Scarlet Fever			то -	4	4	11	9	23	***	ř 0	•	•	32
	Polio encephalitis		-	•	•	•	:	•	:	•		•		
	Age Periods	0	:	.:	: ::	4		10	15	02	25	45	65 and over	Totals

NEW CASES OF TUBERCULOSIS AND MORTALITY DURING THE YEAR 1948.

	Non-Respiratory	Female	0		;		9 9	:	J- 0 0	•	•	•	
Deaths	Non-R	Male			•	•	•	*	•	:	* * * * * * * * * * * * * * * * * * * *	P	
De	atory	Female	o of controlled to the control	•	6		2	•			¢ • • •	4	
	Respiratory	Male		•		•		<u></u>	<b></b> -		•	33	
	New	Female		+-1	2	•	•	:	•	•	:	ಣ	
Cases		Male	*	•		* *	П	;	*	•	*	2	
New C		Female	0 4			ಣ	ଠୀ		*	:	:	2	
	Respiratory	Male	* *	6 0	:	* *	23	2	2			7	
				8	:	•		•			•		
	Age Periods		•	•	0 6 6	:	:	•	45		65 and upwards	Totals	

## GENERAL PROVISIONS OF HEALTH SERVICES FOR THE AREA.

#### Public Health Officers for the Local Authority.

The Staff consists of the Medical Officer of Health and the Sanitary Inspector, with one Clerk. The Medical Officer is also appointed to two adjacent County Districts and acts as Divisional Medical Officer for the Local Health Authority in respect of those services administered by the latter.

#### CLINICS AND TREATMENT CENTRES,

These are staffed and administered by the County Council and consist of Maternity and Child Welfare Centres held weekly at Garforth and Kippax and a weekly Child Welfare Centre at Allerton Bywater. There is a Chest Clinic at Garforth attended weekly by the County Tuberculosis Officer. Venereal Diseases are treated at the General Infirmary at Leeds, or at the Clayton Hospital, Wakefield.

Working in the area are three Health Visitors, two Domiciliary Midwives and two Home Nurses. The Home Nursing Service is one which is becoming increasingly important in view of the large number of long-standing cases of ill-health which cannot find accommodation in Hospital. Indeed, the Home Nursing Service, together with its ancillary, the Home Help Service, is greatly needed to fill the gap caused by the shortage of Hospital beds. I am glad to record that, during 1948, an increasing number of Home Helps were made available under the County Council's Home Help Scheme and that their services were greatly used and appreciated in caring for the domestic needs of families in which the mother was lying-in, in Hospital for illness or operation, or lying helpless at home due to accident or ill-health.

#### INFESTATIONS.

Scabies is now, so far as I can ascertain, completely non-existent and apart from a few cases of pediculosis among shool children, which are efficiently supervised and eliminated by the School Nursing Service, there is no evidence to suggest that pediculosis is prevalent amongst the general public.

#### LABORATORY FACILITIES.

The laboratory at the County Hall, Wakefield, is extremely co-operative and all examinations are undertaken promptly and willingly. There is no criticism at all of this Service, which works smoothly and efficiently.

#### AMBULANCE FACILITIES.

The Ambulance Service has been revolutionised under the National Health Service Act, and is now completely under the control of the Local Health Authority. Inevitably, many cases of difficulty and delay arose during the early part of the change-over. The fault, or perhaps the reason, may be sought in the enormously increased demand which followed the inception of the "free" Ambulance Service. In my opinion, there has been very much abuse of the Ambulance Service and this has contributed very largely to any inconvenience which has arisen. It is pleasing to record that these difficulties now seem to be disappearing. The increased provision of new ambulances, many fitted with radio devices to make them readily available for diversion to urgent calls, together with an increasing sense of responsibility on the part of the general public, will, I hope, ensure that a smooth Service will soon be universally available.

#### GENERAL HOSPITALS.

Garforth is fortunate in its geographical nearness to Leeds and Wakefield, where cases of acute illness are readily admitted. Again, it is necessary to point to the difficulty in obtaining accommodation for the aged sick and the chronic sick case. This is

a problem which must remain with us for many years, and is partly due to the increasing longevity which allows greater numbers of people to reach an age when long continued illness is likely to be experienced. Sanatorium accommodation, as I have already said, is sadly deficient and constitutes a grave problem in the prevention of spread of Tuberculosis

#### MORTUARIES.

The mortuary at Allerton Bywater is now no longer used. This decision was taken because of the infrequency with which it was needed, and all bodies are now transported to the modern and convenient mortuary at Garforth.

#### SANITARY CIRCUMSTANCES OF THE AREA.

Water is provided from Leeds Corporation and is of an unusually high standard of purity. Supply has been adequate throughout the year. Four samples were taken during 1948 for bacteriological examination and were all satisfactory. There are no stand-pipes nor wells in the district.

#### DRAINAGE AND SEWERAGE.

I am glad to be able to state that work has · now commenced on the comprehensive new scheme for sewage disposal. A large and modern works is in the course of construction and should be completed within two or three years. This is a most important matter and it is greatly to the credit of the Garforth Urban District Council that they should have shown the necessary courage in undertaking so large a project. In the Garforth area are a very considerable number of houses from which a life of thirty or forty years can confidently be expected, and which are in every way adequate and suitable with the exception that they are provided with privies. Conversion to the water carriage system will now soon be possible and will be a very great advance in the housing circumstances of the area.

#### CLOSET ACCOMMODATION.

No. of privies with open Ashpit		()
No. of pail or Tub Closets		4
No. privies with covered Middens		790
No. of Water Closets	6	2,820
No. of Chemical Closets		4

**Public Conveniences.**—Modern public conveniences are provided at Garforth. New conveniences were opened during the year at Allerton Bywater and a scheme for the provision of similar facilities at Kippax is at present under way.

#### HOUSING.

1	(a) Total number of dwelling houses
1.	inspected for housing defects (under
	Public Health or Housing Acts)
	(b) Number of inspections made for
0	the purpose
۷.	(a) Number of dwelling houses (inclu-
	ded under sub-head (1) above) which
	were inspected and recorded under
	the Housing Consolidated Regulat-
	ions 1925 and 1942
	(b) Number of inspections made for
	the purpose
3.	8
	in a state so dangerous or injurious
	to health as to be unfit for human
	habitation
4.	Number of dwelling houses (exclusive
	of those referred to under the pre-
	ceding sub-head) found not to be
	in all respects fit for human habit-
	ation

Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their Officers

185

3.	Action under Statutory Powers during the year	•
	(a) Proceedings under sections 9, 10 & 16 of the Housing Act, 1936:-	
	<ul> <li>(1) Number of dwelling houses in respect of which notices were served requiring repair</li> <li>(2) Number of dwelling houses which were rendered fit after service of formal notices:—</li> </ul>	12
	(a) By owners (b) By Legal Authority is default	11
	(b) By Local Authority in default of owners	1
	(b) Proceedings under Public Health Act:	
	(1) Number of dwelling houses in respect of which notices were served requiring defects to be remedied	39
	(2) Number of dwelling houses in which defects were remedied after service of formal notices:	
	(a) By owners (b) By Local Authority in default of owners	21 Nil.
	(c) Proceedings under Sections 11 and 13 of the Housing Act, 1936:—	*
	<ul> <li>(1) Number of representations, etc made in respect of dwelling houses unfit for habitation</li> <li>(2) Number of dwelling houses in</li> </ul>	37
	respect of which Demolition Orders were made	31
	(3) Number of dwelling houses demolished in pursuance of demolition orders	6
	(4) Number of dwelling houses in of which undertakings were accepted from owners:	
	(a) To render houses fit for human habitation	2
	(b) As to usage other than for human habitation	4

	roceedings under Section 12 of the	(q)
	ousing Act. 1936.	
	Number of separate tenements or	
	underground rooms in respect	
	of which Closing Orders were	
Nil.	made	
	Number of separate tenements or	
	underground rooms closed in pur-	
Nil.	suance of Closing Orders	
	Number of separate tenements or	
	underground rooms, the Closing	
	Orders in respect of which were	
	determined, the tenement or room	
Nil.	having been rendered fit	
	of new houses erected during 1948:—	4. Numl
92	y Local Authority	(a)
4	y Private Enterprise	
3,541	er of houses in the district	
ŕ	working-class houses included in	Number
3,249	ove	

#### General Observations as to Housing Conditions.

The remarks I made last year still apply in great measure to circumstances existing in 1948. piece-meal procedure can deal satisfactorily with the deplorable conditions prevailing, particularly in the Kippax and Allerton Bywater areas. At the same time, I must record my satisfaction with the conscientious manner in which the Council have tackled this extremely difficult problem. I should like to draw attention to the fact that, during 1948, no fewer than 37 houses were represented under Section 11 of the Housing Act, 1936, and of these, Demolition Orders were made in respect of 31 houses. It will thus be seen that the Council is facing up bravely to its responsibilites and is shouldering the overwhelming burden placed upon them, with honesty and courage.

During 1948, no serious flooding occurred in Allerton Bywater, though this may have been due to the unusually low rainfall experienced. I adhere

to my opinion that the only suitable treatment for the affected area in Allerton Bywater is its inclusion at the earliest possible moment in a Clearance Area.

Overcrowding still exists and I am afraid is unlikely to be eased in the near future. In this we are at one with the rest of the country, and the factors affecting our area are those operating nationally.

#### INSPECTION AND SUPERVISION OF FOOD.

#### 1. Milk and Dairies Order.

(1)	Number of visits to Cowkeepers		72
(2)	Number of Cowsheds visited		20
(3)	Number of Milk Cows	• • •	110
(4)	General Conditions and Type of	Cow	Fair
(5)	General cleanliness of Cows	• • -	Good
(6)	General conditions of sanitation		Good
(7)	Chief Methods of Milk Disposal	Who	lesale
	e Cowsheds have been maintained		_
	in a second literation of the second	المناسية	

the year in a reasonably satisfactory condition.

#### II. Water, Food, and Drugs.

Samples of water taken for analysis		4
Samples of water condemned as unfit to	use	Nil.
Seizures of unwholesome food 11 c		2 qrs.
Convictions for exposing or selling unwh	ole-	
some food	** **	Nil
Samples of food and drugs taken	for	
analysis (Milk)		Nil
Samples of food found adulterated		Nil

#### Other Foods. III.

Number of samples (other than Mi	
by officer of Local Authority for	
ation under the Food and	Drugs
(Adulteration) Act, 1938	Nil
Number found adulterated	Nil
Number of Prosecutions	Nil
Number of Bakehouses in the distr	ict 10
Number of inspections	34
Number of underground bakehouse	s Nil

#### Chemical and Bacteriological Examination of Food.

Examinations are carried out by the County Laboratory and no adverse reports have been notified during the year.

#### BUTCHERS' SHOPS AND SLAUGHTERHOUSES.

Slaughtering is still carried out almost entirely at abbatoirs outside the district.

#### SHOPS ACT, 1934, Sections 10 and 13 (3).

There were 34 visits made under the above Act during 1948, and unsatisfactory conditions were found and remedied in three cases.

I cannot conclude this report without expressing to Mr. Naylor my sincere thanks for his ready and courteous co-operation during the year. His task is an unenviable one, and he is regularly called upon to help in circumstances which are heartbreaking and at the moment, impossible to remedy. His tact and kindness in dealing with people thus unfortunately situated, should earn him the sincere gratitude of the Council, and I must place on record my own personal appreciation of this service.

To the Chairman and Members of the Public Health Committee, I should like to express my thanks for the unfailing patience with which they have listened to my often rather petulant outbursts and the sincere efforts they have made to meet what are, in some cases, almost impossible demands.

I am Gentlemen,

Your obedient Servant,

A. L. TAYLOR.

#### ANNUAL REPORT

of the

#### Sanitary Inspector and Cleansing Superintendent

(R. A. Naylor, c.r.s.i., m.s.i.a.)

For the year 1948.

To the Chairman and Members of the Garforth Urban District Council.

Mr. Chairman and Gentlemen,

I beg to submit my Annual Report on the work of your Public Health Department for the year 1948. Many of the details of inspections are contained in the Report of the Medical Officer of Health.

HOUSING. - During the year, in spite of many difficulties, progress has been made in the demolition of unfit houses. It has been apparent for a time that the mere re-housing of people from old, decrepit property, was, in itself, creating a difficult problem, in so far that as soon as these houses became vacant, another family, willing to accept any conditions due to the acute housing shortage, took over the tenancy. It was resolved, therefore even in the face of this desparate need for more houses, that when the Council decided to re-house a tenant from a house which, in the opinion of the Medical Officer of Health and Sanitary Inspector, was totally incapable of being rendered fit for human habitation, that this house should be represented under Section 11 of the Housing Act, 1936 with a view to demolition. This policy may seem dras tic at the present time, but the dreadful living conditions prevailing in the Kippax and Allerton Bywater areas have forced us to the conclusion that it is the only sane policy to adopt. Whilst the figures show that much work has been done, the only solution lies in the provision of more and more new houses, and when the time arises, a very progressive and intensive drive to clear away houses which have long since become absolutely unfit for human habitation.

As will be seen from the report of the Medical Officer of Health, 37 houses were represented during the year, and as a result, 103 persons were re-housed in new Council houses. In eight cases it was necessary to treat the furniture of tenants, prior to re-housing, with Hydrogen Cyanide. to eradicate bed bugs. Of the 37 houses represented, 28 were in Allerton Bywater, 8 in Kippax, and one in Garforth

# Summary of Sanitary Improvements effected during 1948.

Interior of Houses:—		
Floors renewed or repaired Walls and ceilings replastered Dampness abated		22 71 21
New glazed sinks provided		15
Windows enlarged or repaired		7
Doors repaired or renewed Cooking ranges repaired or renewed Food stores improved	ed	14 21 7
Water supplies improved	• • •	11
Exterior of Houses:		
Roofs repaired Eaves gutters repaired or renewed Walls re-pointed		47 39 12
Walls rendered Yards paved	• • •	3
Drainage:		
Drains cleared from obstruction Defective drains re-laid	* * *	97 51
Inspection chambers provided		. 7
Cesspools abolished Soil pipes repaired		1 11
Sanitary Accommodation:—		
W.C. pedestals renewed W.C. cisterns renewed Additional W.C.'s provided Privies converted to W.C.'s Ashpits abolished	•••	17 10 5 25 31
Dustbins provided and renewed		149

#### RATS AND MICE DESTRUCTION: -

Major	infestations	abated	 	7
Minor	infestations	abated	• • •	69

#### MILK SUPPLY.

20 Cowshed inspections were made during the year, and three new dairies were provided. At two farms the sheds were reconstructed.

#### BAKEHOUSES.

34 visits were made to bakehouses in the district and in two instances attention was drawn to lack of cleanliness.

#### MEAT AND OTHER FOODS.

31 inspections were made at shops of unsound food and the following food was condemned as unfit for human consumption. No slaughtering of animals for sale takes place in this area, all the meat being distributed from the Leeds City slaughter-house.

Meat	• • •	11 cwts. 2 grs.
Bacon	• • •	103 lbs.
Eggs		243
Preserved Meats		43 tins.
Butter		21 lbs.
Fruit		57 tins

There are no Ice Cream manufacturers in the district, but 12 visits have been made to premises selling ice cream. In every case, a modern refrigerator for the storage of ice cream is installed.

#### FACTORIES (Mechanical and Non-Mechanical.)

Premises	Number of				
	Inspections (2)	Written Notices (3)	Occupiers prosecuted (4)		
Factories (including Factory Laundries) Workshops	4	•••	• • •		
(including Workshop Laundries)	17	•••	•••		

#### DEFECTS FOUND IN FACTORIES & WORKSHOPS

	Nur	nber of D	Number of offences in		
Particulars.	Found	Redem-	Referred to H.M.	respect of which Presecutions were instituted	
(1)	(2)	(3)	(4)	(5)	
Want of Cleanliness			• .	• • •	
Overcrowding				* * *	
Unreasonable Temperature					
Inadequate Ventilation				• • •	
Ineffective Drainage of Floors				•••	
Sanitary Conveniences					
Insufficient	2	2			
Unsuitable or Defective	1	1			
Not Separate for Sexes	1	1		• • •	
Other offences against the Act			1		
(not including offences relating				* * *	
to Outwork)					
Total	4	4	• • -	••	

#### SANITARY INSPECTION OF DISTRICT.

D 1 1	0.4
Bakehouses	34
Complaints investigated	172
Cowsheds and Dairies	20
Caravans	11
Drainage Inspections	71
Dwelling-housesHousing Acts (re-	
inspections	185
Dwelling-houses - Public Health Acts	
(re-inspections)	243
Dwelling-houses inspected — Infec-	
Disease	34
Dwelling houses inspected—Vermin	111
Factories and Workshops inspected	21
Fried Fish shops	18
Food Shops	43
Ice Cream Premises	12
Public Cleansing Service	114
Rats and Mice (Destruction) Act	93
Works in Progress	104

#### REFUSE COLLECTION AND DISPOSAL.

The cleansing of the district is carried out by direct labour, three Karrier Bantam and one Bedford Refuse Collection vehicles being employed. During the year, the system of controlled tipping of refuse was extended and a large disused quarry at Garforth Cliff was acquired. Negotiations are proceeding for the purchase of another large quarry at Brierlands, East Garforth, which will provide tipping accommodation for many years,

Salvage collection was improved during the year, due mainly to the adoption of a Salvage Bonus Scheme, and the following table gives details of materials sold during the period 1st January to 31st December, 1948.

Material.	Material.		Weight		Income			
		$\overline{\Gamma}$ ons.	cwts.	 . qrs	lbs	£	s.	d
Paper		62	6	1	11	404	17	11
Rags	• • •	6	13	1	0	132	12	7
Sacking		1	2	3	15	9	<b>2</b>	10
Iron		7	0	0	0	18	13	11
Lead			3	0	24	11	<b>2</b>	11
Aluminium			1	0	26	1	14	9
Other Metal				1	20	1	3	3
Bottles and Jars		19	16	0	0	151	1	5
Kitchen Waste		48	15	0	0	73	2	6
Totals.		145	18	1	12	803	12	1

I am, Gentlemen,

Your obedient Servant, R. A. NAYLOR.









